

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

No. IS THIS AN AMENDMENT? Yes

(CFA-4) **Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION	1 1:		1	
Full Name of Committee (as on Statement of Organization) Check if this is a new		<u> </u>		
Friends of Steve Bishop				
2. Acronym or Abbreviated Name (if any)	3. Carr	mittee Telephone Number		
	131	7 , 291-6754		
4. Mailing Address (address where all campaign finance correspondence is received)	Check if the	is is a new address		
5. City, State, ZIP Code		y Affijiation (if applicable)		
Indianapolis, Indiana 46224		publican		
CANDIDATE INFORMATION (For Candidate's				
7. Full Name of Candidate (include any nickname)	8. Part	y Affiliation or If Independent Candidate		
<u> Dtephen Bishop</u>	<u> K</u>	publican		
9. Office Sought (Include district number, if any. Not required for exploratory committee.)		inty of Residence		
Wayne lownship Board District 5	_ <i>[</i> /	Narion		
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY	
11. Check one:		Check one:		
Pre-Primary X Pre-Election Annual Nomination Other		Pre-Conv		
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement of Organization)				
12. Reporting Peripd: From: 4/4/12 Through: 19/0/12		COLUMN A This Period	COLUMN B Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.		Ø		
14. Cash on hand and investments January 1, current year.			&	
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			200 1/	
15a, Itemized (use Schedule A)		557.40	557.40	
15b. Unitemized		116		
	TOTAL	557.40 e-ee	551.40 8.00	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	557.40 0:00	557.40 e.ou	
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		58.50	581.50	
17b. Unitemized		- 0: 0:		
	BTOTAL	581.50 0.00	581.50 0.00	
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	<u>581.50 e.ee</u>	581.SD 0:00	
19. Debts OWED BY the committee (use Schedule D)		0		
20. Debts OWED TO the committee (use Schedule E)		ē.		

	CERTIFICATION		
I CERTIFY THAT I HAVE EXAMINED THIS ST	ATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE,	CORRECT AND COMPLETE.	
Signature of Hasher My	P Treasurer	Date 10/17/12	
Signature of Candidate (if applicable)		Date	
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who falls to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)			

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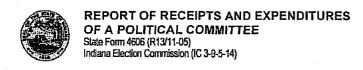
State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures <u>totaled on ITEM 17a</u> of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER				
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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Coole Wayne Township Team AC 5007 W 14th St Speedway, IN 46224		□ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other □ Purpose: Vard Signs	481.50	481.50	9/27/12
Wayne Township Tean AC 5007 W 14th St Speedyny, IN 46224		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	[W.W	581.50	9/27/12
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	·		
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct			
	SUBTOTAL THIS PAGE OF SCHEDULE B				
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 581.50		



(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. Wayne Township Team PAC 5007 W 14th St Indpls, IN 46224-6503	Contributions: Direct In-Kind (describe) Newsparer ac Other Receipts: Seedway Inw Interest Loan Tess Misc. (specify)		405.Ø	(গ্রাহ
Nayne Township Team PAC 5007 W 14th St Indpls, IN 40224-6503	Contributions: Contributions: Contr	152.40	557.40	W/12/12
	Misc. (specify)		¢	
3.	Contributions; Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEI	A ON THE LAST PAGE ONLY W 15a of the Summary Sheet)	\$ 557.40		